



Permit #: \_\_\_\_\_  
**FEE: \$53/DAY:** \_\_\_\_\_  
 Make checks payable to:  
**CITY OF CONCORD**

Return to:  
 City of Concord  
 Code Administration  
 37 Green St  
 Concord, NH 03301  
 603-225-8580

## Application for Temporary Peddlers/Vendors License

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*First Last M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_  
 Business Business Business  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Gender:  Weight:  Hair Color:   
 Age:  Height:  Eye Color:

Vehicle Description	Year:	Make:	Model:	Color:	Registration

VIN: \_\_\_\_\_

Photograph of Vehicle or Stand Being Used: YES  NO  Proposed Dates of Operation: From: \_\_\_\_\_ To: \_\_\_\_\_

Written Permission from Abutters and/or Property Owners: YES  NO  Proposed Hours of Operation: From: \_\_\_\_\_ To: \_\_\_\_\_

Copy of State of NH Hawkers & Peddlers License: YES  NO  Certificate of Insurance: YES  NO

Products Being Sold: \_\_\_\_\_

Location for Sale of Goods: \_\_\_\_\_

**THIS LICENSE MAY BE REVOKED ACCORDING TO CHAPTER 15, SECTION 10-12 & 10-13 OF THE MUNICIPAL CODE OF ORDINANCES.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Health & Licensing Officer